

**Department of Mental Health Quality Council
Definition and Plan
March, 2013**

The newly implemented Quality Council is committed to overseeing quality improvement functions to include quality assurance. The QC is action oriented with a focus that ensures that actions taken are consistent with the intent of the Department, are not redundant, and provide valuable information used for decision-making across Department units.

“Quality Council is the internal management group that will oversee the quality improvement efforts of the department.” The purpose was and continues to be “an action oriented group that can authorize the necessary changes needed for quality improvement function.” The Quality Council is an internal committee within the Department of Mental Health intended as a vehicle for determining direction, focus, priorities and policy decisions.

I. Key functions of the committee include:

- Providing recommendations and input into activities of the DMH Quality Management Unit
- Review of DMH quality management goals
- Recommendation for policy development
- Recommendation and review of feedback mechanisms to designated agencies, specialized service providers, and designated hospitals to enhance communication

II. Given that the Quality Council is newly launched, after a hiatus of several years, the initial work of the Quality Council will include:

- Review of Charge to the Quality Management Unit and the Council itself
- Review of Membership
- Review of Quality Management activities, requirements and work plan
 - Quality assurance activities
 - Internal and external to the Department
 - Quality improvement activities
 - Internal and external to the Department
 - Definition of quality standards and their utilization
 - Current reporting with frequency
 - Ensure that all reporting meets regulatory and compliance requirements
 - Agreement as to benchmarks, targets, or standards
 - Performance management indicators
 - Development of new indicators and tools
 - Prioritize needs

- Dashboard development and review
- Review of current workgroups

II. Ongoing meetings should include standard agenda items previously focused upon and expanded to include:

- Requirements of the Managed Care Entity for delegation
 - Effectiveness of underlying processes and procedures changes
- Reporting requirements required by legislative action
 - Act 79, Act 87, Act 114
- Inclusion of key indicators from the Green Mountain Psychiatric Care Center and the Secure Residential as a separate quality council is not recommended
- Reporting on transition of care areas to ensure proper handoffs
 - Identification of access to care issues
 - Coordination with Medical Care delivery system and actions to improve collaboration and coordination of services
- Review of new policies, processes and procedures

IV. Annual reporting by the Director of Quality Management to the Quality Committee may include:

- Quality Management work plan
 - Include list of barriers to quality management functions internal and external to the Department
 - Development of policies and procedures
 - Review and revision of criteria used for utilization review and care management
- Perception of care results including CRT, Children and Families and Adult Outpatient once that new process has been finalized
- Alignment of work with the Agency of Human Services strategic goals and organizational quality standards
- Alignment of work with the regulatory quality standards
- Analysis of communication effectiveness to stakeholders

V. Regular Reporting Topics

- Review current information collection, processes, time frames
 - Define indicators
- Designation/re-designation of agencies, specialized services and designated hospitals
 - Agency minimum standards review
 - Program review including site visits
 - Quality improvement efforts
 - Findings by designated agency/hospital
 - Department expectations of designated agencies/hospitals
 - Review of grievances

VI. Children and Families Unit (CMH): Annualized Reports

- a. Monthly admissions by catchment area

DMH Quality Council

Susan Onderwyzer

3/19/13

- b. Length of Stay (LOS) by catchment area,
- c. Children under 18 admitted for Emergency Examinations (EE's) by catchment,
- d. Department of Children and Families (DCF) custody by catchment, with a column of YTD for each